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|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|
| SERIAL NUMBER<br>10/786,500 | FILING DATE<br>02/25/2004<br><br>RULE | CLASS<br>273 | GROUP ART UNIT<br>3711 | ATTORNEY DCKE<br>NO.<br>727-002 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/451,429 03/04/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 05/18/2004

|   |                           |                        |                      |                            |
|---|---------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>NJ | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>8 | INDEPENDENT<br>CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                      |                            |
| Verified and Acknowledged<br>Examiner's Signature <u>[Signature]</u> Initials <u>[Initials]</u>   |                           |                        |                      |                            |

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## TITLE

TABLE GAME

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| FILING FEE<br><br>RECEIVED<br>385 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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